

07/30/02

NORTH DAKOTA DEPARTMENT OF HUMAN SERVICES  
MEDICAL SERVICES DIVISION  
600 EAST BOULEVARD  
BISMARCK, NORTH DAKOTA 58505

SB1-810-AA

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\* THIS IS NOT A BILL \*  
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THE DEPARTMENT OF HUMAN SERVICES HAS PAID ON YOUR BEHALF THE MEDICAL SERVICES LISTED BELOW. IF YOU DID NOT RECEIVE ONE OR MORE OF THE SERVICES OR IF THE SERVICES ARE DIFFERENT FROM WHAT YOU ACTUALLY RECEIVED, PLEASE EXPLAIN THE PROBLEMS IN WRITING ON THE OTHER SIDE OF THIS FORM AND SEND THE FORM TO THE ADDRESS PRINTED ABOVE. THANK YOU.

FOR THOSE WHO HAVE RECEIVED PRESCRIPTION DRUG SERVICES, PLEASE READ THE FOLLOWING:

1. IF YOU PICKED YOUR MEDICATION UP AT THE DRUG STORE, DID YOUR PHARMACIST TALK TO YOU ABOUT YOUR MEDICATION OR DID HE/SHE PROVIDE YOU WITH WRITTEN INFORMATION ABOUT YOUR MEDICATION?
2. IF THE PHARMACIST DID NOT DO EITHER OF THE THINGS LISTED ABOVE, PLEASE DESCRIBE THE PROBLEM IN WRITING ON THE OTHER SIDE OF THIS FORM AND SEND THE FORM TO THE ADDRESS PRINTED ABOVE

CLAIM CONTROL NUMBER	PHYSICIAN, HOSPITAL, PHARMACY, OR OTHER SUPPLIER OF MEDICAL SERVICE	DATE SERVICE WAS RECEIVED FROM TO	QTY DISP	BILLED AMOUNT
[REDACTED]	[REDACTED]	[REDACTED]		
SERVICE: X-RAY EXAM OF SHOULDER	[REDACTED]	[REDACTED]		
SERVICE: 1 HOUR OCCUPATIONAL THERAPY	[REDACTED]	[REDACTED]		
SERVICE: 30 MINUTES OCCUPATIONAL THERAPY	[REDACTED]	[REDACTED]		
SERVICE: ESTABLISHED PATIENT 3	[REDACTED]	[REDACTED]		
SERVICE: 15 MINUTES OCCUPATIONAL THERAPY	[REDACTED]	[REDACTED]		
SERVICE: 15 MINUTES OCCUPATIONAL THERAPY	[REDACTED]	[REDACTED]		
SERVICE: PROPOXYPHENE NAPSYLATE W/APAP	[REDACTED]	[REDACTED]		